## **ADDENDUM 2**

## CENTER FOR DISEASE CONTROL RECOMMENDED ADULT IMMUNIZATION SCHEDULE

Vaccines are listed under routinely recommended ages. Bars indicate range of acceptable ages for immunizations. Catch-up immunizations should be done during any visit when feasible.

Age → Vaccine ↓	18-24 yrs	25-64 yrs	65+yrs
Influenza	Х	X	X
Influenza FluMist Nasal Spray	X	X	
Pnuemococcal	Х	X	X
Measles	X	X	
Mumps	Х	X	
Rubella	X	X	
Varicella	X	X	X
Tetanus/Diphtheria (Td)	Χ	X	X
Polio	Χ	X	
Hepatitis B4	X	Х	X
Hepatitis A	Х	X	X

## **SUMMARY OF ADULT IMMUNIZATION INDICATIONS**

## A. Influenza Vaccine.

- 1. Adults 50 years of age and older.
- 2. Adults of any age with chronic cardiovascular or pulmonary disorders, including asthma.
- 3. Residents of nursing homes or other like facilities for patients with chronic medical conditions.
- 4. Adults with chronic metabolic diseases (including diabetes), renal dysfunction, anemia, immunosuppressive or immunodeficiency disorders, which required regular medical follow-up or hospitalization in the past year.
- 5. Groups, household members and caregivers, who can transmit influenza to persons at high risk.

- B. The Influenza FluMist Nasal Spray is recommended for individuals who are between the ages of 18 and 49. A physician will determine who can use the FluMist nasal spray.
  - C. Pneumococcal Vaccine.
    - 1. Adults 65 years of age and older.
- 2. Adults of any age with significant chronic cardiovascular or pulmonary disorders including asthma.
- 3. Adults with splenic dysfunction asplenia, Hodgkin's Disease, multiple myeloma, cirrhosis, alcoholism, renal failure, cerebrospinal fluid leeks, immunosuppressive conditions.
  - D. Measles, mumps, rubella, (MMR) vaccine.
- 1. Adults (especially women of child-bearing age) born after 1956 without written documentation of immunization on or after their first birthday or seropositivity.
- 2. Health care personnel born since 1956 who are at risk of exposure to patients with measles or rubella should have documentation of two doses of vaccine on or after the first birthday or of measles seropositivity.
  - 3. HIV-infected person.
  - 4. Travelers to foreign countries.
  - 5. Persons entering college.
  - 6. Persons vaccinated with killed measles virus vaccine from 1963-1969.
  - E. Varicella (Chicken Pox) vaccine.
- 1. Adults of any age without a reliable history of varicella disease or vaccination, or who are seronegative for varicella.
  - 2. All susceptible health care workers.
  - 3. Susceptible family contacts of immunocompromised persons.
- 4. Susceptible persons in the following groups who are at high-risk exposure:
- (a) Persons who live or work in environments in which transmission of varicella is likely.
  - (b) Nonpregnant women of childbearing age.

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DATE: 08/04/2004
TRICARE CHANGE #: N/A

- (c) International travelers.
- F. Tetanus and Diphtheria (Td) toxoids combined.

All adults.

- G. Poliovirus vaccine (inactivated subcutaneous and oral).
- 1. Health care workers and laboratory workers who may be in close contact with patients excreting wild poliovirus or who handle specimens from such patients.
- 2. Members of community with current disease caused by wild polio viruses.
  - 3. Travelers to developing countries.
  - H. Hepatitis B vaccine.
- 1. Persons with occupational risk of exposure to blood or blood-contaminated fluids.
  - 2. Clients and staff of institutions for the developmentally disabled.
  - 3. Hemodialysis patients.
  - 4. Recipients of clotting-factor concentrates.
  - 5. Household contacts and sex partners of HBV carriers.
  - 6. Adoptees from countries where HBV infection is endemic.
  - 7. Certain international travelers.
  - 8. Injecting drug users.
  - 9. Sexually active homosexual and bisexual men.
- 10. Sexually active heterosexual men and women with multiple sex partners or recent episode of sexually transmitted disease.

Note: Contraindications for the above listed vaccines are a consideration for all care providers.

I. Hepatitis A vaccine is recommended for use in selected states and regions, and for certain high-risk groups. Consult your local health authority for further information.